UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

MARC WESLEY,

Plaintiff,

1:25-CV-4720 (LTS)

-against-

DOE,

ORDER DIRECTING PAYMENT OF FEES OR IFP APPLICATION AND PRISONER AUTHORIZATION

Defendant.

LAURA TAYLOR SWAIN, Chief United States District Judge:

Plaintiff, who is currently incarcerated at the Rikers Island – West Facility Annex, brings this action *pro se*. To proceed with a civil action in this Court, a prisoner must either pay \$405.00 in fees – a \$350.00 filing fee plus a \$55.00 administrative fee – or, to request authorization to proceed *in forma pauperis* (IFP), that is, without prepayment of fees, submit a signed IFP application and a prisoner authorization. *See* 28 U.S.C. §§ 1914, 1915. If the Court grants a prisoner's IFP application, the Prison Litigation Reform Act requires the Court to collect the \$350.00 filing fee in installments deducted from the prisoner's account. *See* 28 U.S.C. § 1915(b)(1). A prisoner seeking to proceed in this Court without prepayment of fees must therefore authorize the Court to withdraw these payments from his account by filing a "prisoner authorization," which directs the facility where the prisoner is incarcerated to deduct the \$350.00 filing fee from the prisoner's account in installments and to send to the Court certified copies of the prisoner's account statements for the past six months. *See* 28 U.S.C. § 1915(a)(2), (b).

Plaintiff submitted the complaint without the filing fees or a completed IFP application and prisoner authorization. Within thirty days of the date of this order, Plaintiff must either pay

¹ The \$55.00 administrative fee for filing a civil action does not apply to persons granted IFP status under 28 U.S.C. § 1915.

the \$405.00 in fees or submit the attached IFP application and prisoner authorization. If Plaintiff submits the IFP application and prisoner authorization, they should be labeled with docket number 1:25-CV-4720 (LTS).²

No summons shall issue at this time. If Plaintiff complies with this order, the case shall be processed in accordance with the procedures of the Clerk's Office. If Plaintiff fails to comply with this order within the time allowed, the action will be dismissed.

The Court certifies under 28 U.S.C. § 1915(a)(3) that any appeal from this order would not be taken in good faith, and therefore IFP status is denied for the purpose of an appeal. *Cf. Coppedge v. United States*, 369 U.S. 438, 444–45 (1962) (holding that appellant demonstrates good faith when seeking review of a nonfrivolous issue).

SO ORDERED.

Dated: June 1'

June 17, 2025

New York, New York

/s/ Laura Taylor Swain

LAURA TAYLOR SWAIN

Chief United States District Judge

² Plaintiff is cautioned that if a prisoner files a federal civil action or appeal that is dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, the dismissal is a "strike" under 28 U.S.C. § 1915(g). A prisoner who receives three "strikes" cannot file federal civil actions IFP as a prisoner, unless he is under imminent danger of serious physical injury, and he must pay the filing fees at the time of filing any new action.

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

	Il name of the plaintiff or petitioner applying (each person ust submit a separate application))	CV	() (`			
-against-		(Provide docket number, if available; if filing this with your complaint, you will not yet have a docket number.)					
(fu	II name(s) of the defendant(s)/respondent(s))						
	APPLICATION TO PROCEED WITHO	OUT PREPAYING FE	EES OR COSTS				
an	m a plaintiff/petitioner in this case and declare that I d I believe that I am entitled to the relief requested in oceed in forma pauperis (IFP) (without prepaying fees e:	this action. In support of	this application to	;			
1.	Are you incarcerated?	☐ No (If "No," {	go to Question 2.)				
	Do you receive any payment from this institution?	☐ Yes ☐ No					
	Monthly amount:						
	If I am a prisoner, see 28 U.S.C. § 1915(h), I have attadirecting the facility where I am incarcerated to decand to send to the Court certified copies of my account. U.S.C. § 1915(a)(2), (b). I understand that this means	luct the filing fee from my unt statements for the pas	account in installment st six months. See 28				
2.	Are you presently employed?	☐ No					
	If "yes," my employer's name and address are:						
	Gross monthly pay or wages:						
	If "no," what was your last date of employment?						
	Gross monthly wages at the time:						
3.	In addition to your income stated above (which you should not repeat here), have you or anyone else living at the same residence as you received more than \$200 in the past 12 months from any of the following sources? Check all that apply.						
	(a) Business, profession, or other self-employment (b) Rent payments, interest, or dividends	☐ Yes ☐ Yes	☐ No☐ No				

SDNY Rev: 8/5/2015

	(c) Pension, annuity, or life insurance particle(d) Disability or worker's compensation	•		Yes Yes		No No			
	(e) Gifts or inheritances(f) Any other public benefits (unemploy food stamps, veteran's, etc.)(g) Any other sources	ment, social security,		Yes Yes Yes		No No			
	If you answered "Yes" to any question a money and state the amount that you red								
	If you answered "No" to all of the quest	ions above, explain ho	w you a	re paying	your exp	enses:			
4.	How much money do you have in cash or in a checking, savings, or inmate account?								
5.	Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value:								
6.	Do you have any housing, transportation expenses? If so, describe and provide the				gular moi	nthly			
7.	List all people who are dependent on you for support, your relationship with each person, and how much you contribute to their support (only provide initials for minors under 18):								
8.	Do you have any debts or financial oblig and to whom they are payable:	ations not described a	bove? If	so, descri	be the am	ounts owed			
	claration: I declare under penalty of perjustement may result in a dismissal of my cla	•	mation i	s true. I u	nderstand	l that a false			
Da	ted	Signature							
Na	me (Last, First, MI)	Prison Identifi	cation # (if	f incarcerate	ed)				
Ac	dress City		State	Zip	Code				
Telephone Number		E-mail Addres	s (if availal	ble)					

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

(full	name of the plaintiff/petitioner)	_	CV		() (
-against-			(Provide docket number, if av complaint, you will not yet ha				
(full	name(s) of the defendant(s)/responden	t(s))					
	PR	ISONER AUTHO	ORIZATION				
Ву	signing below, I acknowledge	that:					
(1)	1) because I filed this action as a prisoner, I am required by statute (28 U.S.C. § 1915) to pay the full filing fees for this case, even if I am granted the right to proceed <i>in forma pauperis</i> (IFP), that is, without prepayment of fees;						
(2)	(2) the full \$350 filing fee will be deducted in installments from my prison account, even if my case is dismissed or I voluntarily withdraw it.						
Ιaι	thorize the agency holding m	e in custody to:					
(1)	send a certified copy of my p (from my current institution six months);			-			
(2)	2) calculate the amounts specified by 28 U.S.C. § 1915(b), deduct those amounts from my prison trust fund, and disburse those amounts to the Court.						
	s authorization applies to any er district court to which my c			sferre	d and t	o any	
Dat	e	_	Signature				
Nar	ne (Last, First, MI)		Prison Identifi	cation :	#		
Add	Iress	City	State		Zip Coo	de	
	_						

¹ A "prisoner" is "any person incarcerated or detained in any facility who is accused of, convicted of, sentenced for, or adjudicated delinquent for, violations of criminal law or the terms or conditions of parole, probation, pretrial release, or diversionary program." 28 U.S.C. § 1915(h).